



颜永成学校

GAN ENG SENG SCHOOL

1 HENDERSON ROAD SINGAPORE 159561

TEL: 6474 5594 FAX: 6473 2479

Email : gess@moe.edu.sg

School Web: <http://ganengsengsch.moe.edu.sg/>

APPLICATION FOR TRANSFER TO GAN ENG SENG SCHOOL

(To be placed on waitlist for Secondary Two and Three admission for both local and international students)

A Pupil's Particulars

Name: _____ NRIC No: _____ Sex: * M / F

Date of Birth: _____ Mother Tongue: *Chinese / Malay / Tamil / _____

Race: _____ Nationality: _____

Course Applying for: Sec _____ Year _____ *Express/Normal Academic/Normal Technical

Pupil is staying with * Father / Mother / Guardian _____ (Name)

B For International Students Only

Did you ever study in any school in Singapore? * No / Yes If

'Yes', please provide the following details:

Name of School: _____ Date Admitted: _____

Highest Level Attained: _____ Date Left: _____

Principals Academy Certification Test (PACT) Results:

(please attached PACT results and Qualifying Test)

English: _____

Maths: _____

Talent(s): (1) _____ (2) _____

(please attached supporting document(s), if any)

Singapore Contact Person Details

Name:(Mr / Mrs / Mdm / Miss) _____

Home Address: _____

Contact No(s): _____(Home) _____(Office)

_____ (Handphone) _____(Others)

Email Address: _____(if any)

Relationship to Pupil: * Father / Mother / Guardian / _____

C For Transfer Cases Only

Current Secondary School: _____

(please attached Final, Mid-Year results and PSLE Certificate)

CCA / Talent(s) / Achievement(s): (1) _____(2) _____

(please attached supporting document(s), if any)

Parent's or Guardian's Particulars

Name: :(Mr / Mrs / Mdm / Miss) _____

Nationality: _____ Occupation: _____

Contact No(s): _____(Home) _____(Office)

_____ (Handphone) _____(Others)

Relationship to Pupil: * Father / Mother / Guardian / _____

Reasons for Transfer:

I certify all the above information is correct.

Parent's / Guardian's Signature

* Delete where appropriate

Date